



**Commonwealth of Massachusetts**  
**Executive Office of Health and Human Services**  
**Division of Medical Assistance**  
600 Washington Street  
Boston, MA 02111

**MassHealth**  
**Municipally Based Health Services Bulletin 7**  
**October 2000**

**TO:** Municipally Based Health Services Providers Participating in MassHealth

**FROM:** Wendy E. Warring, Commissioner

**RE:** Increased Per Diem Rates

---

**Background**

The per diem rates for municipally based health services for special-education students have been revised effective December 1, 1999.

---

**New Rates**

Providers should use the rates listed below to bill for services provided to MassHealth members on or after December 1, 1999.

Prototype	Service Code	Service Description	Rate
502.8	X7668	Early Childhood	\$120.79/week
502.6	X7666	.6 Residential Placement and .5 Cost Share	\$52.67/day
502.5	X7665	.5 Day Placement	\$50.62/day
502.4	X7664	.4 Separate Placement	\$26.95/day
502.1, 502.2, 502.3	X7663	Public Day Program	\$12.41/day

---

**Adjustment Claims**

To receive the difference between the previous rate and the new rate for claims for dates of service on or after December 1, 1999, that have already been paid at the old rate, providers may submit adjustment claims.

---

**Questions**

If you have any questions about this bulletin, including how to prepare adjustment claims, please call the MassHealth Provider Services Department at (617) 628-4141 or 1-800-325-5231.

---